SAMPLE-INDIVIDUAL

Georgia Form 500
Individual Income Tax Return
Georgia Department of Revenue



Page 2

	YOUR SOCIAL SECUI	RITYNUMBER										
CONT.	7a. Number of Dependents (DO NOT include yourself or your spouse)						7a.					
P 2 -	7b. Add Lines 6c and 7a. Enter total.											
STE	If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Exa	mple -3,456.										
OME	8. Federal adjusted gross income (From Federal Form 1040,1040A or 1040 EZ) ▶ 8.											
- INC	(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is le you must enclose a copy of your Federal Form 1040 Pages 1 and 2.											
3	9. Adjustments from Schedule 1 (See Tax Booklet on Page 11, Line 9)	9.			2	5	0	0	. 00			
	10. Georgia adjusted gross income (Net total of Line 8 and Line 9)	10.							. 00			
	11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION)											
	b. Self: 65 or over? Blind? Spouse: 65 or over? Blind?											
SN	Total x 1,300= 11b.											
DUCTIO	c. Total Standard Deduction (Line 11a + Line 11b)											
DE	12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must enclose I											
	a. Federal Itemized Deductions (Schedule A-Form 1040)											
EP4	b. Less adjustments: (See Tax Booket on Page 13, Line 12)											
S	c. Georgia Total Itemized Deductions											
	13. Subtract either Line 11c or Line 12c from Line 10; enter balance	13.										
	14a. Number on Line 6c. multiply by \$2,700 for filing status A or D oR multiply by \$3,700 for filing status B or C	14a.							. 00			
	14b. Number on Line 7a. multiplied by \$3,000	14b.										
N	14c. Add Lines 14a. and 14b. Enter total	14c.							. 00			
PUTATIO	15. Georgia taxable income (Line 13 less Line 14c or Schedule 3, Line 14)											
TAX COME	16. Tax (Use Tax Table in the Tax Booklet on Pages 20-22)						. 00					
	17. Credits from Schedule 2, Page 5, Line 12 of Form 500 (Enter total but not more than the amount on Line 16)		2	5	0	0	. 00					
STEPS	18. Balance (Line 16 less Line 17) if zero or less than zero, enter zero 18.											
No. of the last	19. Georgia Income Tax Withheld on Wages and 1099s (Enter Tax Withheld Only and enclose W-2s and/or 1099s)	19.							. 00			
	20. Other Georgia Income Tax Withheld	20.										





YOUR SOCIAL SECURITY NUMBER SCHEDULE 1 ADJUSTMENTS to INCOME BASED on GEORGIA LAW (See Tax Booklet on Pages 11 and 12) ADDITIONS to INCOME 1. Interest on Non-Georgia Municipal and State Bonds..... 2. Lump Sum Distributions..... 2. 3. Federal deduction for income attributable to domestic production activities 3. (IRC Section 199) QEE CREDIT 2 5 0 0 4. Other (Specify) 4. 5. Total Additions (Enter sum of Lines 1-4 here)..... 2 5 0 0 5. SUBTRACTION from INCOME 6. Retirement Income Exclusion (See Tax Booklet on Page 11) a. Self: Date of Birth Date of Disability: Type of Disability: 6a. Type of Disability: b. Spouse: Date of Birth Date of Disability: 6b. 7. Social Security Benefits (Taxable portion from Federal return)...... 7. 8. Path2College 529 Plan..... 8. 9. Interest on United States Obligations (See Tax Booklet on Page 11) 10. Other Adjustments (Specify) Adjustment Amount Adjustment Amount Adjustment Amount Adjustment Amount Total..... 10. 11. Total Subtractions (Enter sum of Lines 6-10 here)..... 11. 12. Net Adjustments (Line 5 less Line 11). 2 5 0 0 Enter Net Total here and on Line 9 of Page 2 (+ or -) of Form 500.....

Other State Credit(s) Tax Credit (See Tax Booklet on Page 15)......

 1.



2017	YOUR SOCIAL SECURITY NUMBER	
SCHEDULE 2 CRE	DITS for LINE 17, PAGE 2 (See Tax Booklet on Pages 13 and 16)	

	Credits from Form IND-CR (Rural Physicians Credit, Disabled Person Home Purchase or Retrofit Credit, Driver Education Credit, Disaster Assist-												
	ance Credit, Qualified Caregiving Expense Credit, Georgia National Guard/Air National Guard Credit, Child and Dependent Care Expense Credit												
	Adoption Credit, Eligible Sin	gle-Family Residence Credit)	2.						00				
	Low Emission Vehicle Cred (Requires DNR certification	dit or Zero Emission Vehicle Cre for either credit)	edit▶ 3.						.00				
	• /	se Credit (Individual/Non pass throug	gh)▶ 4.		2	5	0	0	00				
_	01 F B	dit (Individual/Non pass through)	. .		T				00				
5.	Pass Through Credi You must list the appro	ts from Ownership of Sole Propi opriate Credit Type Code in the space of on Line 10. See Tax Booklet on Pag	rietor, S Corp., LLC e provided. If you clain	n more than four credits, en	close	a sc	hedul						
6.	COMPANY NAME					CR	EDIT	COD	E TYPE				
MONTH	OWNERSHIP	FEIN	CREDIT CLAIMED ON THIS RETURN										
									. 00				
7.	COMPANY NAME					CR	EDIT	COD	E TYPE				
					Ш			_					
	OWNERSHIP	FEIN		CREDIT CLAIMED ON	THIS	RET	URN	The state of the s	00				
8.	COMPANY NAME					CR	EDIT	COD	E TYPE				
	OWNERSHIP	FEIN		CREDIT CLAIMED ON	THIS	DE	THEN						
				GREDIT GEALWED OF) IXL	lora	- Control of the Cont	. 00				
9.	COMPANY NAME					CR	EDIT	COD	E TYPE				
						- Contractive and a second							
feri aboyo	OWNERSHIP	FEIN		CREDIT CLAIMED ON	THIS	RET	URN	Maria Maria	-				
									00				
10.	Any additional pass-throug	h credits claimed (Attach schedule).	10.		The state of the s				. 00				
11.	Low Income Credit (See T	ax Booklet). 11a. 11	1b		11c.				. 00				
12.	Enter the total of Lines 1 th	rough 11 here and on Line 17, Pg. 2	of 500 form > 12.		2	5	0	0	00				

SAMPLE- INDIVIDUAL OWNER OF PASSTHROUGH ENTITY

Georgia Form 500
Individual Income Tax Return
Georgia Department of Revenue



Page 2

	YOUR SOCIAL SECUR	RITYNUMBER				1						
P 2 -+ CONT.	7a. Number of Dependents (DO NOT include yourself or your spouse)											
STE	If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Exa	mple -3,456.										
OME	8. Federal adjusted gross income (From Federal Form 1040,1040A or 1040 EZ) ▶ 8.											
- INC	(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is less you must enclose a copy of your Federal Form 1040 Pages 1 and 2.											
3	9. Adjustments from Schedule 1 (See Tax Booklet on Page 11, Line 9)	0	0	0	. 00							
STEP	10. Georgia adjusted gross income (Net total of Line 8 and Line 9)	10.								. 00		
STATE AND ADDRESS OF THE PARTY	11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION) (See Tax Booklet on Page 12 Line 11)	11a.										
	b. Self: 65 or over? Blind? Spouse: 65 or over? Blind?											
NS	Total x 1,300= 11b.											
DUCTIO	c. Total Standard Deduction (Line 11a + Line 11b)											
DE	12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must enclose Federal Schedule											
	a. Federal Itemized Deductions (Schedule A-Form 1040)	a. Federal Itemized Deductions (Schedule A-Form 1040)										
EP 4	b. Less adjustments: (See Tax Booket on Page 13, Line 12)	12b.								. 00		
S	c. Georgia Total Itemized Deductions	c. Georgia Total Itemized Deductions										
	13. Subtract either Line 11c or Line 12c from Line 10; enter balance	13.								. 00		
	14a. Number on Line 6c. multiply by \$2,700 for filing status A or D or multiply by \$3,700 for filing status B or C	14a.								00		
	14b. Number on Line 7a. multiplied by \$3,000 14b.											
N	14c. Add Lines 14a. and 14b. Enter total	14c.								. 00		
PUTATIO	5. Georgia taxable income (Line 13 less Line 14c or Schedule 3, Line 14)											
AXCOM	16. Tax (Use Tax Table in the Tax Booklet on Pages 20-22)											
1 4	17. Credits from Schedule 2, Page 5, Line 12 of Form 500 (Enter total but not more than the amount on Line 16)											
STEP 5	3. Balance (Line 16 less Line 17) if zero or less than zero, enter zero 18.											
	19. Georgia Income Tax Withheld on Wages and 1099s (Enter Tax Withheld Only and enclose W-2s and/or 1099s)	19.								. 00		
	20. Other Georgia Income Tax Withheld	20.								00		





																		-		
							YO	UR SC	CIAL	SECUR	RITYNUMB	ER								Ш
SCHEDULE 1 AI	JUST	MENT	Sto	INC	OME B	ASE	D on	GEOF	RGIAL	.AW(S	eeTax Bool	klet on Pa	ages 11	and 1	12)					
ADDITIONS to INC	OME																			
1. Interest on Non-C	Georgia	Munic	ipal aı	nd St	ate Bo	nds					1.									. 00
2. Lump Sum Distr	ibutions	S									2.									
Federal deduction for income attributable to domestic production act (IRC Section 199)					ivities	▶	3.													
4. Other (Specify)	Q	EE	c	R	EI	I	т			>	4.				1	0	0	0	0	.00
5. Total Additions (Enter s	um of L	ines '	1-4 h	ere)						5.				1	0	0	0	0	00
SUBTRACTION fro	m INC	OME																East-marks	diam'r consis	l' Russerel
6. Retirement Incor	ne Excl	usion (See T	ax Bo	ooklet o	n Pa	ge 11)							_						
a. Self: Date of Bir	th		Dat	e of [Disabili	ty:			Туре	of Disa	ability:							_		
														6a.						. 00
b. Spouse: Date of	Birth		Dat	e of D	Disabili	ty:			Туре	e of Dis	ability:	o served and leave			t and the same					
			П											6b.						00
7. Social Security E	Benefits	(Taxab	ole po	ortion	from F	eder	al retui	m)		Þ	7.									
8. Path2College 52	9 Plan.									▶	8.									
9. Interest on Unite	ed State	es Oblic	ation	ıs (Se	ee Tax	Book	let on	Page	11)	▶	9.									
10. Other Adjustme									,											11
Adjustment			T							Am	ount							Ī		00
Adjustment			T			П				Am	ount								Ī	00
Adjustment		Ħ				T				Am	ount									00
Adjustment	Ť	Ħ								Am	ount									00
						Tota	al				10.									. 00
11. Total Subtraction	s (Ente	r sum c	of Line	es 6-1	10 here	:)					11.									00
12. Net Adjustments	(Line	5 less L	ine 1	1).							5.68				1		0	•		





017	
YOUR SOCIAL SECURITY NUMBER	
SCHEDULE 2 CREDITS for LINE 17, PAGE 2 (See Tax Booklet on Pages 13 and 16)	

1.	1. Other State Credit(s) Tax Credit (See Tax Booklet on Page 15)											
2.	Credits from Form IND-CR (Rural Physicians Credit, Disabled Person Home Purchase or Retrofit Credit, Driver Education Credit, Disaster Assist-											
	ance Credit, Qualified Careg	giving Expense Credit, Georgia National Guard/Air N	National Guard Credit, Child and Depend	ent Care Expense Credit,								
	Adoption Credit, Eligible Sing	gle-Family Residence Credit)	· 2.	.00								
 3. 4. 	Low Emission Vehicle Cred (Requires DNR certification Qualified Education Expens	0 0 0 00										
	No. of the second secon											
5.	Pass Through Credit You must list the appro	dit (Individual/Non pass through)	o., LLC or Partnership Interest and you claim more than four credits, enclose	e a schedule.								
6.	COMPANY NAME			CREDIT CODE TYPE								
	OWNERSHIP	FEIN	CREDIT CLAIMED ON THIS	RETURN								
7.	COMPANY NAME			CREDIT CODE TYPE								
	OWNERSHIP	FEIN	CREDIT CLAIMED ON THIS	RETURN								
				. 00								
8.	COMPANY NAME			CREDIT CODE TYPE								
	OMATERIAL											
	OWNERSHIP	FEIN	CREDIT CLAIMED ON THI	SRETURN								
				1.00								
9.	COMPANY NAME			CREDIT CODE TYPE								
	OWNERSHIP	FEIN	CREDIT CLAIMED ON THIS	RETURN								
				_ 00								
10.	Any additional pass-through	n credits claimed (Attach schedule)	10.	.00								
11.	Low Income Credit (See Ta	ax Booklet). 11a. 11b.		_00								
12.	Enter the total of Lines 1 three	ough 11 here and on Line 17, Pg. 2 of 500 form	12.	0 0 0 00								